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**FACSIMILE COVER SHEET**

In the UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor: Manfred BOLLER

Application No. 10/668,971

Attorney Docket No. 2001P02943WOUS

Filed: 09/24/2003

Title: METHOD FOR FRANKING AND PROCESSING DELIVERIES

Examiner: Mark HAGEMAN

Art Unit: 3653

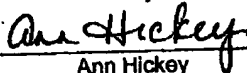
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NO. 5341, (09) P. 2


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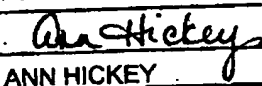
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/668,971	
	Filing Date	09/24/2003	
	First Named Inventor	Manfred BOLLER	
	Art Unit	3653	
	Examiner Name	Mark HAGEMAN	
Total Number of Pages in This Submission	15	Attorney Docket Number	2001P02943WOUS

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply (11 pgs.) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 pg.) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawings (Replacement and Annotated Sheets) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>- Request for Continued Examination (1 pg.)</b>
<div style="border: 1px solid black; height: 80px; margin-top: 5px;"> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Remarks</div> </div>		

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